

Substitute for Form 1449 A & B/PTO		<i>Complete if Known</i>	
<u>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</u>		Application Number	10/698,467
		Confirmation Number	1832
		Filing Date	November 03, 2003
		First Named Inventor	Emmanuel DESURVIRE
		Art Unit	Not Assigned 2454
		Examiner Name	Not Assigned Mohamed Wasel
Sheet	1	of	1
		Attorney Docket Number	Q78045

Examiner Signature /Mohamed Wasel/ (03/26/2009) **Date Considered**

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /MW/

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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